



Bur-Mil Park and Clubhouse
5834 Bur-Mil Club Rd., Greensboro, NC 27410
(336) 373-3800
www.burmilpark.org

Bur-Mil Park Season Pool Pass- 2010

Family Name: _____

Address: _____

Phone #: _____

E-Mail address: _____

Pass Purchased:

Family Pass \$150.00 # of family members _____

Additional Members \$30.00 # of additional family members _____

Family members must live in the same household.

Adult Individual \$70.00 Child Individual \$50.00

Names of adults: _____

Names of children: _____ Age: _____
_____ Age: _____
_____ Age: _____
_____ Age: _____

Bur-Mil Family Aquatic Center is a public facility. This pass is intended to give the purchaser a discount on pool entry. However, it does not give the cardholder exclusive rights to the pool or preferred entry into the pool. If we are already at capacity when the cardholder arrives, he/she will have to wait in line until there is an opening. Cardholders need to present their passes to the cashier and sign in at each visit. Adults will need to present identification along with their passes. Season pool passes are intended for the person whose name appears on the card. If anyone is caught using the pass other than the person to whom it belongs, it will be retained by the pool cashier and not returned. If your card gets lost, or stolen, please report it immediately so that we may issue you a new one.

Please be aware that an adult must accompany all children. Individuals under 13 years of age must have a parent or legal guardian who is at least 18 years of age or older to supervise them in the pool. Children are not allowed to wear arm floaties, however, they can wear USCG approved life vest if needed.

No refunds will be given once the pass is issued. There will be an automatic \$25 returned check fee for any payments returned to us for non-sufficient funds. Passes will be revoked until your account has been paid.

For a complete list of pool rules, please consult the park office staff or the pool staff.

I have read and understand these rules.

(Name)
Date: _____

(Signature)
Paid by: Check # _____ Cash _____ CC _____

For office use only: Date mailed/ distributed & initials: _____



**Bur-Mil Park is owned by Guilford County and
managed by the Greensboro Parks & Recreation.**

